

## **GOLD KEY SERVICE QUESTIONNAIRE**

### **COMPANY INFORMATION**

COMPANY NAME:

YEAR ESTABLISHED:

ADDRESS:

CITY/STATE/ZIP:

CONTACT NAME:

TITLE:

TELEPHONE:

FAX:

EMAIL ADDRESS:

WEB SITE:

TYPE:

☐ MANUFACTURER

☐ SERVICE

☐ DISTRIBUTOR

☐ MANUFACTURER'S REP ☐ OTHER \_\_\_\_\_

ANNUAL SALES:

☐ < \$1 MILLION

☐ \$1 – \$5 MILLION

☐ \$6 – \$50 MILLION

☐ \$51 – \$75 MILLION

☐ \$76 MILLION +

NUMBER OF EMPLOYEES:

☐ 1 – 49

☐ 50 – 99

☐ 100 – 249

☐ 250 – 499

☐ 500 – 999

☐ 1000 +

EXPORT STATUS:

☐ NEW TO EXPORT

☐ NEW TO MARKET

☐ INCREASE TO MARKET

ARE THERE ANY FIRMS YOU DO NOT WANT US TO CONTACT AND IF YES, PLS ADVISE NAMES.

ARE THERE ANY FIRMS YOU WANT US TO CONTACT AND IF YES, PLS PROVIDE DETAILS.

### **PRODUCT/SERVICE INFORMATION**

1. BRIEFLY DESCRIBE THE PRODUCT/SERVICE AND IF PRODUCT, NOTE IF IT IS AT LEAST 51% U.S. CONTENT
  
  
  
  
  
  
  
  
  
  
2. INDICATE THE UNIQUE FEATURES AND COMPETITIVE ADVANTAGES OF YOUR PRODUCT/SERVICE AND NOTE ANY MAJOR COMPETITORS IN THIS COUNTRY
  
  
  
  
  
  
  
  
  
  
3. LIST THE MAIN END-USERS (INDUSTRIES) OF YOUR PRODUCT/SERVICE AND NOTE THE KEY DECISION-MAKER IN THOSE INDUSTRIES (I.E. PRESIDENT, PRODUCTION MANAGERS, PURCHASING AGENTS, ENGINEERS, ETC.)
  
  
  
  
  
  
  
  
  
  
4. DETAIL HOW YOUR PRODUCT/SERVICE IS DISTRIBUTED AND MARKETED (US AND ABROAD)

### **GOLD KEY OBJECTIVES**

PURPOSE OF VISIT: ☐ SEEK INVESTORS

☐ SEEK CUSTOMERS

☐ SEEK DISTRIBUTOR\*

☐ SEEK AGENT/REP\*    ☐ SEEK JOINT VENTURE\*    ☐ OTHER (SPECIFY) \_\_\_\_\_

\*DESCRIBE THE TYPE OF FIRM(S) THAT WOULD MEET YOUR CRITERIA AS A "PERFECT" MATCH (INCLUDE CHARACTERISTICS SUCH AS SIZE, EXPERIENCE, GEOGRAPHIC COVERAGE, DISQUALIFYING ATTRIBUTES ETC.)

### **LOGISTICS**

1. WOULD YOU LIKE US TO MAKE YOUR HOTEL RESERVATIONS AT THE EMBASSY RATE? ☐ YES ☐ NO  
IF YES, PLS PROVIDE CREDIT CARD DETAILS UNDER "PAYMENT" SUBHEADING AND PLEASE LIST DATES OF  
ARRIVAL AND DEPARTURE: \_\_\_\_\_ THROUGH \_\_\_\_\_

2. WHERE DO YOU PREFER TO HOLD MEETINGS?    ☐ HOTEL ☐ ON-SITE ☐ U.S. EMBASSY ☐ MIXTURE  
MINIMUM NUMBER OF MEETINGS PER DAY: \_\_\_\_\_ MAXIMUM NUMBER OF MEETINGS PER DAY: \_\_\_\_\_  
FIRST MEETING NO SOONER THAN: \_\_\_\_\_ LAST MEETING ENDS NO LATER THAN: \_\_\_\_\_

3. INTERPRETER IS NOT REQUIRED IN SINGAPORE

4. DO YOU NEED US TO ARRANGE A CAR AT YOUR OWN COST?    ☐ YES ☐ NO

### **PAYMENT**

☐ ENCLOSED IS A CHECK MADE PAYABLE TO U.S. DEPARTMENT OF COMMERCE FOR  
US\$ \_\_\_\_\_ TO COVER SERVICE FEES.

☐ PLEASE CHARGE THE SERVICE FEE OF US\$ \_\_\_\_\_ TO MY CREDIT CARD  
\_\_\_\_ AMERICAN EXPRESS    \_\_\_\_ MASTERCARD    \_\_\_\_ VISA    \_\_\_\_ DISCOVER  
NAME OF CARDHOLDER: \_\_\_\_\_  
ACCOUNT NUMBER: \_\_\_\_\_  
EXPIRATION DATE: \_\_\_\_\_  
SIGNATURE: \_\_\_\_\_  
DATE: \_\_\_\_\_

### **FEEDBACK**

1. HOW DID YOU LEARN ABOUT THE GOLD KEY SERVICE?

☐ WEB SITE    ☐ TRADE MISSION/SHOW    ☐ CS OFFICER/STAFF PERSON    ☐ OTHER \_\_\_\_\_

2. ARE YOU INTERESTED IN THE GOLD KEY SERVICE IN OTHER CITIES?

IF YES, PLS INDICATE THE CITIES: \_\_\_\_\_

3. IF YOUR COMPANY HAS EVER USED THE US DEPARTMENT OF COMMERCE EXPORT PROMOTION  
SERVICE, PLEASE INDICATE WHICH SERVICE(S):

<input type="checkbox"/> INTL PARTNER SEARCH	<input type="checkbox"/> CATALOG SHOW	<input type="checkbox"/> CERTIFIED MARKET ANALYSIS
<input type="checkbox"/> INTL COMPANY PROFILE	<input type="checkbox"/> NTDB	<input type="checkbox"/> GOLD KEY SERVICE
<input type="checkbox"/> TRADE MISSION	<input type="checkbox"/> TRADE SHOW	<input type="checkbox"/> OTHER _____